### Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 1 of 42

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |  |   |
|-----|---|--|---|
|     |   | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |  |   |
|     | Write the name that is on   | Carlos                                   |   |
|     | your government-issued<br>picture identification (for<br>example, your driver's                                   | First name                               | First name                                    |
|     | license or passport).   | Middle name                              | Middle name                                   |
|     | Bring your picture  | Rojas                                    |   |
|     | identification to your meeting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
|     |   |  |   |
| 2.  | All other names you have used in the last 8 years   |  |   |
|     | Include your married or maiden names.   |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8358                              |   |
|     |   |  |   |

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 2 of 42

Case number (if known)

Debtor 1 Carlos Rojas

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 158 N 22nd Ave Melrose Park, IL 60160 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 3 of 42 Case number (if known) Debtor 1 Carlos Rojas

| ar      | t 2: Tell the Court About   | Your E   | 3ankruptcy Ca   | ise                                |  |   |                               |  |  |
|---------|---|--|-----------------|------------------------------------|--|---|-------------------------------|--|--|
| 7.      | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7 |                 |                                    |  |   |                               |  |  |
|         | choosing to file under  |  |                 |                                    |  |   |                               |  |  |
|         |   |  | Chapter 11      |                                    |  |   |                               |  |  |
|         |   |  | Chapter 12      |                                    |  |   |                               |  |  |
|         |   |  | Chapter 13      |                                    |  |   |                               |  |  |
|         |   |  |                 |                                    |  |   |                               |  |  |
| 3.      | How you will pay the fee  |  | about how yo    | u may pay. Typ<br>attorney is subn | ically, if you are paying the                      | e check with the clerk's office in your<br>fee yourself, you may pay with cash<br>ir behalf, your attorney may pay with | , cashier's check, or money   |  |  |
|         |   |  |                 |                                    | allments. If you choose this (Official Form 103A). | s option, sign and attach the Application for Individuals to Pay  |                               |  |  |
|         |   |  |                 |                                    |  | option only if you are filing for Chap  |                               |  |  |
|         |   |  | applies to you  | ur family size an                  | d you are unable to pay the                        | y if your income is less than 150% o<br>e fee in installments). If you choose the                                       | nis option, you must fill out |  |  |
|         |   |  | the Application | on to Have the C                   | Chapter 7 Filing Fee Waived                        | (Official Form 103B) and file it with   | your petition.                |  |  |
|         |   |  |                 |                                    |  |   |                               |  |  |
| ).      | Have you filed for<br>bankruptcy within the   | ■ N  | 0.              |                                    |  |   |                               |  |  |
|         | last 8 years?   | ☐ Y  | es.             |                                    |  |   |                               |  |  |
|         |   |  | District        |                                    |  | Case number   |                               |  |  |
|         |   |  | District        |                                    | When   | Case number   |                               |  |  |
|         |   |  | District        |                                    | When   | Case number   |                               |  |  |
| 10      | Are any bankruptcy  |  |                 |                                    |  |   |                               |  |  |
| ٠٠.     | cases pending or being  | ■ N  |                 |                                    |  |   |                               |  |  |
|         | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | □ Y  | <b>9</b> S.     |                                    |  |   |                               |  |  |
|         |   |  | Debtor          |                                    |  | Relationship to ye  | ou                            |  |  |
|         |   |  | District        |                                    | When   | Case number, if I   | known                         |  |  |
|         |   |  | Debtor          |                                    |  | Relationship to ye  | ·                             |  |  |
|         |   |  | District        |                                    | When   | Case number, if I   | known                         |  |  |
| <br>I1. | Do you rent your  | ■ N  | Go to li        | ine 12.                            |  |   |                               |  |  |
|         | residence?  |  | 0.              |                                    | inad an aviation judament a                        | against you?  |                               |  |  |
|         |   | □ Y  |                 | No. Go to line                     | ined an eviction judgment a                        | ayamat you:   |                               |  |  |
|         |   |  |                 |                                    |  | iation Judgmont Against Vov / Farrer  | IO1A) and file it as now of   |  |  |
|         |   |  |                 | this bankruptcy                    |  | ction Judgment Against You (Form 1  | io ia) and lile it as part of |  |  |

Document Page 4 of 42 Case number (if known) Debtor 1 Carlos Rojas Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

For example, do you own

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Carlos Rojas Document Page 5 of 42 Case number (if known)

Part 5: Explai

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 6 of 42 Case number (if known)

| Deb  | tor 1           | Carlos Rojas                                 |  | Document   | i age o or -                                | Case number (iii                          | f known)   |
|--|-----------------|--|--|--|---|---|--|
| Par  | t 6:            | Answer These Questi                          | ons for R  | eporting Purposes  |   |   |  |
| 16.  |                 | t kind of debts do<br>have?                  | 16a.   | Are your debts primarily consindividual primarily for a personal       | sumer debts? Consumal, family, or household | ner debts are defined<br>d purpose."      | l in 11 U.S.C. § 101(8) as "incurred by an                                       |
|  |                 |  |  | ☐ No. Go to line 16b.  |   |   |  |
|  |                 |  |  | Yes. Go to line 17.  |   |   |  |
|  |                 |  | 16b.   | Are your debts primarily busing money for a business or investment.    |   |   |  |
|  |                 |  |  | ☐ No. Go to line 16c.  |   |   |  |
|  |                 |  |  | ☐ Yes. Go to line 17.  |   |   |  |
|  |                 |  | 16c.   | State the type of debts you owe  | that are not consumer                       | r debts or business d                     | lebts  |
| 17.  |                 | ou filing under oter 7?                      | □ No.  | I am not filing under Chapter 7.                                       | Go to line 18.                              |   |  |
| Do you estimate that<br>after any exempt<br>property is excluded and |                 | ■ Yes.                                       | I am filing under Chapter 7. Do gare paid that funds will be available |  |   | y is excluded and administrative expenses |  |
|  |                 | inistrative expenses<br>paid that funds will |  | ■ No   |   |   |  |
|  | be a            | vailable for ibution to unsecured itors?     |  | Yes  |   |   |  |
| 18.  |                 | many Creditors do                            | <b>1</b> -49   |  | <b>1</b> ,000-5,000                         |   | ☐ 25,001-50,000  |
|  | you owe         | estimate that you                            | ☐ 50-99  |  | <b>5001-10,000</b>                          |   | <b>5</b> 0,001-100,000   |
|  |                 |  | □ 100-1<br>□ 200-9   |  | □ 10,001-25,000                             |   | ☐ More than100,000   |
| 19.  | How much do you |  | <b>\$</b> 0 - \$   | 50 000   | □ \$1,000,001 - \$1                         | 10 million                                | □ \$500,000,001 - \$1 billion  |
|  |                 | nate your assets to orth?                    |  | 01 - \$100,000   | □ \$10,000,001 - \$                         | \$50 million                              | □ \$1,000,000,001 - \$10 billion   |
|  |                 |  |  | 001 - \$500,000  | □ \$50,000,001 - \$ □ \$100,000,001 -       |   | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                       |
|  |                 |  | <b>□</b> \$500,  | 001 - \$1 million  | <b>—</b> \$100,000,001 -                    | HOIIIIII OOCÇ                             | ☐ More than \$50 billion   |
| 20.  |                 | much do you                                  | <b>\$0 - \$</b>  | 50,000   | <b>\$1,000,001 - \$1</b>                    | 10 million                                | □ \$500,000,001 - \$1 billion  |
|  | estin           | nate your liabilities<br>e?                  | <b>□</b> \$50,0  | 001 - \$100,000  | □ \$10,000,001 - \$                         |   | \$1,000,000,001 - \$10 billion   |
|  |                 |  |  | 001 - \$500,000  | □ \$50,000,001 - \$ □ \$100,000,001 -       |   | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                       |
|  |                 |  | □ \$500,   | 001 - \$1 million  | <b>—</b> \$100,000,001                      | 4500 million                              | More than \$50 billion   |
| Part   | t 7:            | Sign Below                                   |  |  |   |   |  |
| For  | you             |  | I have ex  | camined this petition, and I declar                                    | e under penalty of perj                     | ury that the informat                     | ion provided is true and correct.  |
|  |                 |  |  | chosen to file under Chapter 7, I a tates Code. I understand the relie |   |   | der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.          |
|  |                 |  |  | rney represents me and I did not<br>nt, I have obtained and read the n |   |   | n attorney to help me fill out this  |
|  |                 |  | I request  | relief in accordance with the cha                                      | pter of title 11, United                    | States Code, specific                     | ed in this petition.   |
|  |                 |  | bankrupt<br>and 357  | cy case can result in fines up to \$<br>1.                             |   |   | roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519, |
|  |                 |  | Carlos   | os Rojas<br>Rojas  | Si  | ignature of Debtor 2                      |  |
|  |                 |  |  | e of Debtor 1  |   | -   |  |
|  |                 |  | Executed   | d on   | E:  | xecuted on                                |  |
|  |                 |  |  | MM / DD / YYYY   |   | MM / D                                    | DD / YYYY  |

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 7 of 42

Debtor 1 Carlos Rojas Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ FAUSTINO RODRIGUEZ                 | Date          |                         |
|--|---------------|-------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY          |
| FAUSTINO RODRIGUEZ                     |               |                         |
| Printed name                           |               |                         |
| Law Office of Faustino Rodriguez       |               |                         |
| Firm name                              |               |                         |
| 5141 W Fullerton Ave                   |               |                         |
| Chicago, IL 60639                      |               |                         |
| Number, Street, City, State & ZIP Code |               |                         |
| Contact phone <b>773-237-3465</b>      | Email address | frodriguezlaw@gmail.com |
| 6227080 IL                             |               |                         |
| Bar number & State                     |               |                         |

Document Page 8 of 42 Fill in this information to identify your case: Debtor 1 Carlos Rojas Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t1: Summarize Your Assets  |              |                          |
|-----|--|--------------|--------------------------|
|     |  | Your a       | ssets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 4,850.00                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 4,850.00                 |
| Par | t 2: Summarize Your Liabilities  |              |                          |
|     |  |              | abilities<br>t you owe   |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 0.00                     |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 0.00                     |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 17,665.00                |
|     | Your total liabilities   | \$           | 17,665.00                |
| Par | t 3: Summarize Your Income and Expenses  |              |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 2,994.00                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 2,815.00                 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |              |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sch | nedules.                 |
| 7.  | ■ Yes What kind of debt do you have?   |              |                          |
|     |  |              |                          |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Entered 08/02/18 15:06:23 Desc Main Doc 1 Filed 08/02/18 Case 18-21794 Document

Page 9 of 42 Case number (if known) Debtor 1 Carlos Rojas

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

1,420.00 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

Document Page 10 of 42 Fill in this information to identify your case and this filing: Debtor 1 Carlos Rojas Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Honda Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: CRV Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2008 Debtor 2 only Current value of the Current value of the 198000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$2,800.00 \$2,800.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,800.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured

claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

| Debtor 1                             | Case 18-21794 DOC1 Filed 08/02/18 Efficied 08/02/18 15:06.23  Document Page 11 of 42  Case number (if knot)  |   |
|--------------------------------------|--|---|
| ■ Yes.                               | Describe   |   |
|                                      | Household Furniture  | \$450.00  |
| ■ No                                 | nics  les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mus including cell phones, cameras, media players, games  Describe  | ic collections; electronic devices                          |
| Examp  ■ No                          | <ul> <li>ibles of value</li> <li>les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, c other collections, memorabilia, collectibles</li> <li>Describe</li> </ul> | oin, or baseball card collections;                          |
| Examp  No                            | nent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cano musical instruments  Describe   | es and kayaks; carpentry tools;                             |
| ■ No<br>□ Yes.                       | ples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe   |   |
| □ No                                 | ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe  Clothes  | \$600.00  |
| ■ No<br>□ Yes.<br>13. <b>Non-f</b> a | ry  pples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem  Describe  |   |
| ■ No<br>□ Yes.                       | ples: Dogs, cats, birds, horses  Describe ther personal and household items you did not already list, including any health aids you did not list   | t   |
| ■ Yes.                               | Give specific information  Computer, dishes, other personal items  | \$800.00  |
|                                      | the dollar value of all of your entries from Part 3, including any entries for pages you have attached lart 3. Write that number here  | \$1,850.00  |
|                                      | escribe Your Financial Assets<br>wn or have any legal or equitable interest in any of the following?   | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

Case 18-21794 Filed 08/02/18 Entered 08/02/18 15:06:23 Document Page 12 of 42 Case number (if known) **Carlos Rojas** Debtor 1 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Chase Bank \$200.00 17 1 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Doc 1

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

■ No

Desc Main

|    |                | Case                       | 18-21794             | Doc 1                           |  |  | Desc Main   |
|----|----------------|----------------------------|----------------------|---------------------------------|--|--|---|
| D  | ebtor 1        | Carlos                     | Rojas                |                                 | Document   | Page 13 of 42  Case number (if known)                  |   |
| 27 | Examp<br>■ No  | oles: Buildi               |                      | usive licenses                  | ngibles<br>, cooperative association                 | n holdings, liquor licenses, professional licens       | ses   |
|    | ☐ Yes.         | Give spec                  | cific information a  | about them                      |  |  |   |
| M  | loney or       | property o                 | owed to you?         |                                 |  |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | _              | unds owe                   | ed to you            |                                 |  |  |   |
|    | ■ No □ Yes.    | Give speci                 | ific information a   | bout them, inc                  | cluding whether you alrea                            | ady filed the returns and the tax years                |   |
| 29 | Examp<br>■ No  |                            | due or lump sum      |                                 | usal support, child suppo                            | ort, maintenance, divorce settlement, property         | v settlement  |
| 30 | Examp          | oles: Unpai<br>benef       | fits; unpaid loans   | lity insurance<br>s you made to |  | efits, sick pay, vacation pay, workers' compe          | nsation, Social Security  |
|    | ☐ Yes.         | Give spec                  | cific information    |                                 |  |  |   |
| 31 | Examp<br>■ No  | oles: Health               |                      |                                 | health savings account (I                            | HSA); credit, homeowner's, or renter's insura          | nce   |
|    |                |                            | Con                  | npany name:                     |  | Beneficiary:   | Surrender or refund value:  |
| 32 | If you a someo | are the ber<br>one has die | neficiary of a livir | ng trust, expe                  | n someone who has die<br>ct proceeds from a life in: | ed<br>surance policy, or are currently entitled to rec | eive property because   |
| 33 |                |                            |                      |                                 | you have filed a lawsui                              | it or made a demand for payment                        |   |
|    | ■ No           |                            | ents, employme       | •                               | surance claims, or rights                            | to sue   |   |
| 34 | ■ No           | •                          | t and unliquida      |                                 | every nature, including                              | g counterclaims of the debtor and rights to            | o set off claims  |
| 35 |                |                            | sets you did no      |                                 |  |  |   |
|    | ☐ Yes.         | Give spec                  | cific information    |                                 |  |  |   |
| 3  |                |                            |                      |                                 | rom Part 4, including ar                             | ny entries for pages you have attached                 | \$200.00  |
|    |                |                            |                      |                                 |  |  |   |
| P  | art 5: De      | scribe Any                 | Business-Related     | d Property You                  | Own or Have an Interest I                            | n. List any real estate in Part 1.                     |   |
|    |                |                            |                      |                                 | Own or Have an Interest I                            |  |   |
|    |                | own or have                |                      |                                 |  |  |   |

Official Form 106A/B Schedule A/B: Property page 4

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Page 14 of 42

Case number (if known) Document Debtor 1 Carlos Rojas Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$2,800.00 57. Part 3: Total personal and household items, line 15 \$1,850.00 Part 4: Total financial assets, line 36 \$200.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$4,850.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,850.00

\$4,850.00

|                     |                          |                   | 111 1 1000 10 70 71 |                    |
|---------------------|--------------------------|-------------------|---------------------|--------------------|
| Fill in this infor  | mation to identify your  | case:             |                     |                    |
| Debtor 1            | Carlos Rojas             |                   |                     |                    |
|                     | First Name               | Middle Name       | Last Name           |                    |
| Debtor 2            |                          |                   |                     |                    |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name           |                    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS         |                    |
| Case number         |                          |                   |                     |                    |
| (if known)          |                          |                   |                     | ☐ Check if this is |
|                     |                          |                   |                     | amended filing     |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify t | he Property | You Claim as | Exempt |
|---------|------------|-------------|--------------|--------|
|---------|------------|-------------|--------------|--------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| )1(c) |
|-------|
|       |
| 01(b) |
|       |
| )1(b) |
|       |
| )1(a) |
|       |
| )1(b) |
|       |
| )     |

Filed 08/02/18 Entered 08/02/18 15:06:23 Document Page 16 of 42 Case number (if known) Debtor 1 Carlos Rojas Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Chase Bank** 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 18-21794

Yes

Doc 1

Desc Main

| Fill in this infor  | mation to identify your  | case:             |             |                       |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1            | Carlos Rojas             |                   |             |                       |
|                     | First Name               | Middle Name       | Last Name   |                       |
| Debtor 2            |                          |                   |             |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number         |                          |                   |             |                       |
| (if known)          |                          |                   |             | ☐ Check if this is an |
|                     |                          |                   |             | amended filing        |

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

|                               | Case 10-21734 L                              | Document                             | Page 18 of 42  | 0.00.23 Des              | C Mairi                  |
|-------------------------------|--|--------------------------------------|--|--------------------------|--------------------------|
| Fill in this                  | information to identify your o               |                                      | 1 MMC 10 01 42   |                          |                          |
| Debtor 1                      | Carlos Rojas                                 |                                      |  |                          |                          |
| DODIO! 1                      | First Name                                   | Middle Name                          | Last Name  | _                        |                          |
| Debtor 2                      |  |                                      |  | _                        |                          |
| (Spouse if, filin             | g) First Name                                | Middle Name                          | Last Name  |                          |                          |
| United Stat                   | es Bankruptcy Court for the:                 | NORTHERN DISTRICT OF                 | ILLINOIS   | _                        |                          |
| Case numb                     | per  |                                      |  |                          |                          |
| (if known)                    |  |                                      |  | _ c                      | heck if this is an       |
|                               |  |                                      |  | ar                       | mended filing            |
| Official I                    | Form 106E/F                                  |                                      |  |                          |                          |
|                               | le E/F: Creditors W                          | ho Have Unsecure                     | d Claims   |                          | 12/15                    |
|                               |  |                                      | RITY claims and Part 2 for creditors with  | NONDRIORITY clair        |                          |
| eft. Attach th<br>name and ca |  | e. If you have no information to     | is needed, copy the Part you need, fill it<br>report in a Part, do not file that Part. On  |                          |                          |
|                               | creditors have priority unsecured            |                                      |  |                          |                          |
| _ `                           | Go to Part 2.                                | i ciamis agamst you.                 |  |                          |                          |
| ■ No. 0                       | 50 to Part 2.                                |                                      |  |                          |                          |
|                               | List All of Your NONPRIORIT                  | Y Unsecured Claims                   |  |                          |                          |
|                               | creditors have nonpriority unsec             |                                      |  |                          |                          |
|                               | You have nothing to report in this pa        |                                      | with your other schedules  |                          |                          |
|                               | rou have houring to report in the pe         | art. Submit the form to the court is | nar your outer concounce.  |                          |                          |
| Yes.                          |  |                                      |  |                          |                          |
| unsecur                       | ed claim, list the creditor separately       | for each claim. For each claim lis   | of the creditor who holds each claim. If a sted, identify what type of claim it is. Do not ou have more than three nonpriority unsections. | list claims already incl | luded in Part 1. If more |
|                               |  |                                      |  |                          | Total claim              |
|                               | pital One, N.A.                              | Last 4 digits of a                   | account number   |                          | \$8,165.00               |
|                               | npriority Creditor's Name  80 Capital One Dr | When was the d                       | eht incurred?  |                          |                          |
|                               | C Lean, VA 22102                             | Wileli Was the a                     |  |                          |                          |
|                               | mber Street City State Zlp Code              | As of the date ye                    | ou file, the claim is: Check all that apply  |                          |                          |
| _                             | o incurred the debt? Check one.              |                                      |  |                          |                          |
|                               | Debtor 1 only                                | ☐ Contingent                         |  |                          |                          |
| _                             | Debtor 2 only                                | Unliquidated                         |  |                          |                          |
| _                             | Debtor 1 and Debtor 2 only                   | ☐ Disputed                           | IODITY   |                          |                          |
|                               | At least one of the debtors and and          |                                      | IORITY unsecured claim:  |                          |                          |
| ∐<br>dek                      | Check if this claim is for a comn            |                                      | s<br>rising out of a separation agreement or divo  | orce that you did not    |                          |
|                               | he claim subject to offset?                  | report as priority                   |  | oroe mat you did not     |                          |
|                               | No   | ☐ Debts to pens                      | sion or profit-sharing plans, and other simila   | ar debts                 |                          |
|                               | Yes  | Other. Specify                       | y Credit Card  |                          |                          |

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 19 of 42

Debtor 1 Carlos Rojas Case number (if know) \$9,500.00 4.2 Saks Fifth Ave Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? 3455 Hwy 80 W Jackson, MS 39209 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

■ Other. Specify Credit Card

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

☐ Yes

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |            |    | Total Claim      |
|-----------------------|-----|---|------------|----|------------------|
|                       | 6a. | Domestic support obligations  | 6a.        | \$ | 0.00             |
| Total                 |     |   |            | -  |                  |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b.        | \$ | 0.00             |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c.        | \$ | 0.00             |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.        | \$ | 0.00             |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e.        | \$ | 0.00             |
| Total                 | 6f. | Student loans   | 6f.        | \$ | Total Claim 0.00 |
| claims<br>from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.<br>6h. | \$ | 0.00             |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6i.        | \$ | 0.00             |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | OI.        | \$ | 17,665.00        |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j.        | \$ | 17,665.00        |

|                     |                          | DUGUITIC          | III FAU <del>C</del> ZV VI 4Z |  |
|---------------------|--------------------------|-------------------|-------------------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                               |  |
| Debtor 1            | Carlos Rojas             |                   |                               |  |
|                     | First Name               | Middle Name       | Last Name                     |  |
| Debtor 2            |                          |                   |                               |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                     |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS                   |  |
| Case number         |                          |                   |                               |  |
| (if known)          |                          |                   |                               |  |
|                     |                          |                   |                               |  |

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | whom you have the cr., Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
| 2.2 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     | Number    | Street       |  |                   | _                                       |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
| 2.3 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | _                                       |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
| 2.4 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | _                                       |
|     | Number    | Street       |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
| 2.5 |           |              |  |                   |   |
|     | Name      |              |  |                   | _                                       |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | _                                       |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          | _                                       |
|     |           |              |  |                   |   |

|                               |  | Documei                        | nt Page 21 o              | <u>f 42</u>   |
|-------------------------------|--|--------------------------------|---------------------------|---|
| Fill in this                  | information to identify your                                       | case:                          |                           |   |
| Debtor 1                      | Carlos Rojas   |                                |                           |   |
|                               | First Name   | Middle Name                    | Last Name                 |   |
| Debtor 2<br>(Spouse if, filir | ng) First Name   | Middle Name                    | Last Name                 |   |
| (Spouse II, IIIII             | ig) First Name   | Middle Name                    | Last Name                 |   |
| United Sta                    | tes Bankruptcy Court for the:                                      | NORTHERN DISTRICT              | OF ILLINOIS               |   |
| Case numb                     | ber  |                                |                           |   |
| (if known)                    |  |                                |                           | ☐ Check if this is an   |
|                               |  |                                |                           | amended filing  |
| Official                      | Form 106H  |                                |                           |   |
|                               |  | -64                            |                           |   |
| Schea                         | ule H: Your Cod  | eptors                         |                           | 12/15   |
| 1. Do y  No Yes  2. With      | nin the last 8 years, have you<br>a, California, Idaho, Louisiana  | you are filing a joint case, d | pperty state or territory | 1? (Community property states and territories include   |
| No.                           | Go to line 3.  |                                |                           |   |
| ☐ Yes                         | . Did your spouse, former spo                                      | use, or legal equivalent live  | with you at the time?     |   |
| in line<br>Form               | 2 again as a codebtor only   | f that person is a guarant     | or or cosigner. Make s    | if your spouse is filing with you. List the person shown<br>sure you have listed the creditor on Schedule D (Official<br>SG). Use Schedule D, Schedule E/F, or Schedule G to fill |
|                               | Column 1: Your codebtor<br>Name, Number, Street, City, State and Z | P Code                         |                           | Column 2: The creditor to whom you owe the debt Check all schedules that apply:   |
| 3.1                           |  |                                |                           | ☐ Schedule D, line  |
|                               | Name   |                                |                           | ☐ Schedule E/F, line  |
|                               |  |                                |                           | ☐ Schedule G, line  |
| -                             | Number Street  |                                |                           | -   |
|                               | City   | State                          | ZIP Code                  |   |
| 3.2                           |  |                                |                           | ☐ Schedule D, line  |
|                               | Name   |                                |                           | ☐ Schedule E/F, line  |
|                               |  |                                |                           | Schedule G, line  |
| -                             | Number Street  |                                |                           | _   |

State

City

ZIP Code

# Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 22 of 42

| E:III       | in this information to identify your   | 0000  |                                     |             |          | •                 |                     |                                      |             |          |
|-------------|--|---|-------------------------------------|-------------|----------|-------------------|---------------------|--------------------------------------|-------------|----------|
|             | otor 1 Carlos Roj  |   |                                     |             |          |                   |                     |                                      |             |          |
|             | btor 2  buse, if filing)   |   |                                     |             | _        |                   |                     |                                      |             |          |
| Uni         | ted States Bankruptcy Court for th   | ne: NORTHERN DISTRIC                                      | CT OF ILLINOIS                      |             |          |                   |                     |                                      |             |          |
| (If kr      | se number<br>nown)   |   | -                                   |             |          |                   | ended fi<br>olement | ling<br>showing pos<br>of the follow |             | chapter  |
|             | fficial Form 106l  |   |                                     |             |          | MM / I            | DD/ YYY             | Y                                    |             |          |
| S           | chedule I: Your Ind  | come  |                                     |             |          |                   |                     |                                      |             | 12/15    |
| spo<br>atta | plying correct information. If you use. If you are separated and you have separated and you have separate sheet to this form the separate sheet to this form the separate sheet to this form the separate sheet to this form | our spouse is not filing wi<br>. On the top of any additi | ith you, do not inclu               | de infori   | mati     | on about you      | r spous             | e. If more s                         | pace is i   | needed,  |
| 1.          | Fill in your employment information.   |   | Debtor 1                            |             |          | Dek               | otor 2 or           | non-filing                           | spouse      |          |
|             | If you have more than one job,   | Employment status   | ■ Employed                          |             |          |                   | Employe             | d                                    |             |          |
|             | attach a separate page with information about additional   | Employment status   | ☐ Not employed                      |             |          | 1 🗆               | Not empl            | oyed                                 |             |          |
|             | employers.   | Occupation  | Spokesperson                        |             |          |                   |                     |                                      |             |          |
|             | Include part-time, seasonal, or self-employed work.  | Employer's name   | Village of Melro                    | se Park     | <u> </u> |                   |                     |                                      |             |          |
|             | Occupation may include student or homemaker, if it applies.  | Employer's address  | 1000 North 25th<br>Melrose Park, II |             |          |                   |                     |                                      |             |          |
|             |  | How long employed t                                       | here?                               |             |          |                   |                     |                                      |             |          |
| Par         | t 2: Give Details About Mo   | onthly Income   |                                     |             |          |                   |                     |                                      |             |          |
|             | mate monthly income as of the use unless you are separated.  | date you file this form. If                               | you have nothing to r               | eport for   | any      | line, write \$0 i | n the spa           | ace. Include                         | your nor    | n-filing |
|             | u or your non-filing spouse have r<br>e space, attach a separate sheet t   |   | ombine the informatio               | n for all e | empl     | oyers for that    | oerson o            | n the lines b                        | oelow. If y | ou need  |
|             |  |   |                                     |             |          | For Debtor        |                     | For Debtor<br>non-filing s           |             |          |
| 2.          | List monthly gross wages, sal deductions). If not paid monthly   |   |                                     | 2.          | \$       | 1,227             | .00                 | \$                                   | N/A         |          |
| 3.          | Estimate and list monthly ove  | rtime pay.  |                                     | 3.          | +\$      | 0                 | .00+                | +\$                                  | N/A         |          |

1,227.00

N/A

Calculate gross Income. Add line 2 + line 3.

# Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 23 of 42

| Debt | tor 1                     | Carlos Rojas   | -    | (          | Case i | number ( <i>if ki</i> | nown)   |      |                    |                  |                 |
|------|---------------------------|--|------|------------|--------|-----------------------|---------|------|--------------------|------------------|-----------------|
|      |                           |  |      |            | For    | Debtor 1              |         |      | Debtor<br>filing s |                  |                 |
|      | Col                       | by line 4 here   | 4.   |            | \$     | 1,22                  | 7.00    | \$   |                    | N/A              | _               |
| 5.   | List                      | t all payroll deductions:  |      |            |        |                       |         |      |                    |                  |                 |
| -    | 5a.                       | Tax, Medicare, and Social Security deductions  | 5a   | a.         | \$     | 280                   | 0.00    | \$   |                    | N/A              |                 |
|      | 5b.                       | Mandatory contributions for retirement plans   | 5b   |            | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 5c.                       | Voluntary contributions for retirement plans   | 50   | <b>c</b> . | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 5d.                       | Required repayments of retirement fund loans   | 50   | d.         | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 5e.                       | Insurance  | 5e   | €.         | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 5f.                       | Domestic support obligations   | 5f   |            | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 5g.                       | Union dues   | 50   |            | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 5h.                       | Other deductions. Specify:   | _ 5r | า.+        | \$_    |                       | 0.00    | + \$ |                    | N/A              | -               |
| 6.   | Add                       | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.   |            | \$     | 280                   | 0.00    | \$   |                    | N/A              | _               |
| 7.   | Cal                       | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.   |            | \$     | 947                   | 7.00    | \$   |                    | N/A              | _               |
| 8.   | List<br>8a.               | t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total              |      |            |        |                       |         |      |                    |                  |                 |
|      |                           | monthly net income.  | 88   | а.         | \$     | (                     | 0.00    | \$   |                    | N/A              | _               |
|      | 8b.                       | Interest and dividends   | 8b   | ο.         | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 8c.                       | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 80   | 2.         | \$     | ,                     | 0.00    | \$   |                    | N/A              |                 |
|      | 8d.                       |  | 80   |            | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 8e.                       | Social Security  | 86   | Э.         | \$     | 2,04                  |         | \$   |                    | N/A              | _               |
|      | 8f.                       | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:    | 8f   |            | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 8g.                       | Pension or retirement income   | 80   |            | \$     |                       | 0.00    | \$   |                    | N/A              | _               |
|      | 8h.                       | Other monthly income. Specify:   | _ 8h | า.+        | \$     |                       | 0.00    | + \$ |                    | N/A              | -               |
| 9.   | Add                       | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.   | 9          | S      | 2,047                 | 7.00    | \$   |                    | N/A              | 4               |
| 10   | Cal                       | culate monthly income. Add line 7 + line 9.  | 10.  | \$         |        | 2,994.00              | + \$    |      | N/A                | = \$             | 2,994.00        |
|      |                           | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |      | Ψ_         |        | 2,334.00              | •   • - |      | 17/7               | \[ \] \[ \] \[ - | 2,334.00        |
| 11.  | Sta<br>Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify: | depe |            |        |                       |         |      | chedule<br>11.     |                  | 0.00            |
| 12.  |                           | d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies   |      |            |        |                       |         |      | 12.                | \$               | 2,994.00        |
| 13.  | Do                        | you expect an increase or decrease within the year after you file this form  | ?    |            |        |                       |         |      | į.                 | Combi<br>monthl  | ned<br>y income |
|      |                           | No.  |      |            |        |                       |         |      |                    |                  |                 |

Official Form 106I Schedule I: Your Income page 2

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 24 of 42

|              |                            |                                       |                  |   |                      | _            |                                      |   |
|--------------|----------------------------|---------------------------------------|------------------|---|----------------------|--------------|--------------------------------------|---|
| Filli        | n this informa             | tion to identify yo                   | our case:        |   |                      |              |                                      |   |
| Debt         | tor 1                      | Carlos Rojas                          | S                |   |                      | Chec         | ck if this is:                       |   |
|              |                            |                                       |                  |   |                      | _            | An amended filing                    |   |
| Debt<br>(Spc | ouse, if filing)           |                                       |                  |   |                      |              | A supplement shown 13 expenses as of | wing postpetition chapter the following date: |
| ļ            |                            |                                       |                  |   | 0.10                 | _            | ·                                    |   |
| Unite        | ed States Bankr            | ruptcy Court for the                  | : NORTH          | IERN DISTRICT OF ILLIN                                      | OIS                  |              | MM / DD / YYYY                       |   |
|              | e number                   |                                       |                  |   |                      |              |                                      |   |
| (lf kr       | nown)                      |                                       |                  |   |                      |              |                                      |   |
|              | :::-! <b>-</b>             | 400 l                                 |                  |   |                      | 1            |                                      |   |
|              |                            | rm 106J                               | Evnor            |   |                      |              |                                      |   |
|              |                            | J: Your                               |                  | IS <b>ES</b><br>. If two married people ar                  | o filing together b  | oth are equ  | ally racponaible fo                  | 12/15   |
| info         | rmation. If m              |                                       | eded, atta       | ch another sheet to this                                    |                      |              |                                      |   |
| Part         |                            | ribe Your House                       | ehold            |   |                      |              |                                      |   |
| 1.           | Is this a joir             | nt case?                              |                  |   |                      |              |                                      |   |
|              | No. Go to                  |                                       |                  |   |                      |              |                                      |   |
|              | ☐ Yes. <b>Doe</b>          | es Debtor 2 live                      | in a separ       | ate household?  |                      |              |                                      |   |
|              |                            |                                       |                  |   |                      |              |                                      |   |
|              | ЦΥ                         | es. Debtor 2 mus                      | st file Offici   | al Form 106J-2, Expenses                                    | for Separate House   | ehold of Deb | tor 2.                               |   |
| 2.           | Do you have                | e dependents?                         | ■ No             |   |                      |              |                                      |   |
|              | Do not list D              | ebtor 1 and                           | ☐ Yes.           | Fill out this information for                               | Dependent's relat    |              | Dependent's                          | Does dependent                                |
|              | Debtor 2.                  |                                       |                  | each dependent  | Debtor 1 or Debto    | or 2         | age                                  | live with you?                                |
|              | Do not state dependents    |                                       |                  |   |                      |              |                                      | □ No  |
|              | dependents                 | names.                                |                  |   |                      |              | _                                    | □ Yes<br>□ No                                 |
|              |                            |                                       |                  |   |                      |              |                                      | □ Yes   |
|              |                            |                                       |                  |   |                      |              |                                      | □ No  |
|              |                            |                                       |                  |   |                      |              |                                      | ☐ Yes   |
|              |                            |                                       |                  |   |                      |              |                                      | □ No  |
| 3.           | Do your eyr                | oenses include                        | _                |   |                      |              |                                      | ☐ Yes   |
| Э.           | expenses o                 | f people other t                      | han <sub>—</sub> | No  |                      |              |                                      |   |
|              | yourself and               | d your depende                        | nts? ⊔           | Yes   |                      |              |                                      |   |
| Part         | 2: Estim                   | ate Your Ongoi                        | ng Month         | y Expenses  |                      |              |                                      |   |
| exp          |                            |                                       |                  | uptcy filing date unless y<br>y is filed. If this is a supp |                      |              |                                      |   |
| Incl         | ude expense                | s paid for with                       | non-cash         | government assistance i                                     | f you know           |              |                                      |   |
|              | value of suclicial Form 10 |                                       | d have ind       | cluded it on Schedule I: \                                  | our Income           |              | Your exp                             | enses   |
| (Oii         | iciai Foriii 10            | ,oi.,j                                |                  |   |                      |              | i oui oxp                            |   |
| 4.           |                            | or home owners<br>and any rent for th |                  | ses for your residence. I<br>or lot.                        | nclude first mortgag | e<br>4. \$   | i                                    | 700.00  |
|              | If not includ              | led in line 4:                        |                  |   |                      |              |                                      |   |
|              | 4a. Real e                 | estate taxes                          |                  |   |                      | 4a. \$       | ;                                    | 0.00  |
|              |                            | rty, homeowner's                      | s, or renter     | 's insurance  |                      | 4b. \$       |                                      | 0.00  |
|              |                            |                                       |                  | ipkeep expenses   |                      | 4c. \$       |                                      | 150.00  |
| _            |                            | owner's associa                       |                  |   | ma aguitu la ara     | 4d. \$       |                                      | 0.00  |
| 5.           | Auditional                 | nortgage payme                        | ento for yo      | our residence, such as ho                                   | me equity loans      | 5. \$        | 1                                    | 0.00  |

# Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 25 of 42

| _           | Carlos Rojas   | Case Hulli | ber (if known)   |                            |
|-------------|--|------------|------------------|----------------------------|
| . Utilitie: | s:   |            |                  |                            |
|             | Electricity, heat, natural gas   | 6a.        | \$               | 210.00                     |
|             | Water, sewer, garbage collection   | 6b.        | ·                | 50.00                      |
|             | Telephone, cell phone, Internet, satellite, and cable services   | 6c.        |                  | 150.00                     |
|             | Other. Specify:  | 6d.        | · ———            | 0.00                       |
|             | and housekeeping supplies  | — 7.       | \$               | 420.00                     |
|             | are and children's education costs   | 8.         | \$               | 0.00                       |
|             | ng, laundry, and dry cleaning  | 9.         | \$               | 135.00                     |
|             | nal care products and services   | 10.        | \$               | 140.00                     |
|             | al and dental expenses   | 11.        | :                | 220.00                     |
|             | portation. Include gas, maintenance, bus or train fare.  | 11.        | Ψ                | 220.00                     |
|             | include car payments.  | 12.        | \$               | 120.00                     |
|             | ainment, clubs, recreation, newspapers, magazines, and books   | 13.        | \$               | 150.00                     |
|             | able contributions and religious donations   | 14.        | ·                | 50.00                      |
| 5. Insurai  | •  |            |                  | 30.00                      |
|             | include insurance deducted from your pay or included in lines 4 or 20.   |            |                  |                            |
|             | Life insurance   | 15a.       | \$               | 150.00                     |
|             | Health insurance   | 15b.       | · -              | 0.00                       |
|             | Vehicle insurance  | 15c.       | ·                | 70.00                      |
|             | Other insurance. Specify: <b>Burial Insurance</b>  | 15d.       | ·                | 100.00                     |
|             | Do not include taxes deducted from your pay or included in lines 4 or 20.  |            | Ŧ                | 100.00                     |
| Specify     | <i>y</i> :   | 16.        | \$               | 0.00                       |
|             | ment or lease payments:  | 17a.       | ¢                | 0.00                       |
|             | Car payments for Vehicle 1   |            | ·                | 0.00                       |
|             | Car payments for Vehicle 2   | 17b.       | ·                | 0.00                       |
|             | Other. Specify:  | 17c.       | *                | 0.00                       |
|             | Other. Specify:  | 17d.       | \$               | 0.00                       |
|             | payments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18.        | \$               | 0.00                       |
|             | payments you make to support others who do not live with you.  |            | \$               | 0.00                       |
| Specify     |  | 19.        | <u> </u>         | 0.00                       |
| ). Other r  | real property expenses not included in lines 4 or 5 of this form or on Sche  | dule I: Yo | our Income.      |                            |
| 20a. N      | Mortgages on other property  | 20a.       | \$               | 0.00                       |
| 20b. F      | Real estate taxes  | 20b.       | \$               | 0.00                       |
| 20c. F      | Property, homeowner's, or renter's insurance   | 20c.       | \$               | 0.00                       |
| 20d. N      | Maintenance, repair, and upkeep expenses   | 20d.       | \$               | 0.00                       |
|             | Homeowner's association or condominium dues  | 20e.       | ·                | 0.00                       |
| . Other:    | Specify:   | 21.        |                  | 0.00                       |
|             |  |            | ΙΨ               | 0.00                       |
|             | ate your monthly expenses  |            | œ.               | 2.045.00                   |
|             | dd lines 4 through 21.   |            | \$               | 2,815.00                   |
|             | opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |            | \$               |                            |
| 22c. Ac     | dd line 22a and 22b. The result is your monthly expenses.  |            | \$               | 2,815.00                   |
|             | ate your monthly net income.   |            |                  |                            |
|             | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.       | · -              | 2,994.00                   |
| 23b. (      | Copy your monthly expenses from line 22c above.  | 23b.       | -\$              | 2,815.00                   |
|             | Subtract your monthly expenses from your monthly income.   | 20         | ¢.               | 470.00                     |
| Т           | The result is your monthly net income.   | 23c.       | \$               | 179.00                     |
|             | u expect an increase or decrease in your expenses within the year after yo   |            |                  |                            |
| For eyar    | mple, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage?                          | mortgage p | payment to incre | ease or decrease because o |
|             | ation to the terms of your mortgage?   |            |                  |                            |
|             | , 5 5  |            |                  |                            |

# Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 26 of 42

| Fill in th              | is information to identify your                             | case:                    |                            |                             |                           |
|-------------------------|---|--------------------------|----------------------------|-----------------------------|---------------------------|
| Debtor 1                | Carlos Rojas  |                          |                            |                             |                           |
|                         | First Name  | Middle Name              | Last Name                  |                             |                           |
| Debtor 2<br>(Spouse if, |   | Middle Name              | Last Name                  |                             |                           |
| (Spouse II,             | ming) First Name  | Middle Name              | Last Name                  |                             |                           |
| United S                | tates Bankruptcy Court for the:                             | NORTHERN DISTRICT        | OF ILLINOIS                |                             |                           |
| Case nu                 | mber  |                          |                            |                             |                           |
| (if known)              |   |                          |                            |                             | Check if this is an       |
|                         |   |                          |                            |                             | amended filing            |
|                         |   |                          |                            |                             |                           |
| Officia                 | l Form 106Dec   |                          |                            |                             |                           |
|                         |   |                          | Dabtarla Ca                | hadulaa                     |                           |
| Deci                    | aration About a   | an individual            | Deptor's Sc                | neaules                     | 12/15                     |
|                         | Sign Below  |                          |                            |                             |                           |
| Did                     | you pay or agree to pay some                                | eone who is NOT an attor | ney to help you fill out b | ankruptcy forms?            |                           |
|                         | No  |                          |                            |                             |                           |
| П                       | Yes. Name of person   |                          |                            | Attach <i>Bankruntcy Pe</i> | tition Preparer's Notice, |
|                         |   |                          |                            |                             | ature (Official Form 119) |
|                         |   |                          |                            |                             |                           |
|                         | er penalty of perjury, I declare they are true and correct. | that I have read the sum | mary and schedules filed   | d with this declaration and |                           |
| x                       | /s/ Carlos Rojas  |                          | X                          |                             |                           |
|                         | Carlos Rojas  |                          | Signature of               | Debtor 2                    |                           |
|                         | Signature of Debtor 1                                       |                          | 2.3                        | <del>-</del>                |                           |
|                         | Date  |                          | Date                       |                             |                           |
|                         |   |                          | Date                       |                             |                           |

# Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 27 of 42

| e:u            | in thin inform      | ation to identify you                      |  |  |   |   |
|----------------|---------------------|--|--|--|---|---|
|                |                     | nation to identify your                    | r case:                                    |  |   |   |
| Deb            | tor 1               | Carlos Rojas First Name                    | Middle Name                                | Last Name  |   |   |
|                | tor 2               |  |  |  |   |   |
| (Spot          | use if, filing)     | First Name                                 | Middle Name                                | Last Name  |   |   |
| Unit           | ed States Bar       | nkruptcy Court for the:                    | NORTHERN DISTRICT (                        | OF ILLINOIS  |   |   |
| Cas<br>(if kno | e number            |  |  |  |   | Check if this is an mended filing                     |
| Sta<br>Be a    | s complete a        | of Financial                               | ble. If two married people a               |  | ankruptcy equally responsible for sup diditional pages, write you |   |
|                |                     | n). Answer every ques                      |  | Lived Defens   |   |   |
|                |                     | current marital statu                      | rital Status and Where You                 | Lived Before   |   |   |
|                | Married             |  |  |  |   |   |
|                | ■ Not mar           | riea                                       |  |  |   |   |
| 2.             | During the la       | ast 3 years, have you                      | lived anywhere other than                  | where you live now?  |   |   |
|                | ■ No □ Yes. Lis     | t all of the places you li                 | ived in the last 3 years. Do no            | ot include where you live now  | ·.  |   |
|                | Debtor 1 Pr         | ior Address:                               | Dates Debtor 1 lived there                 | Debtor 2 Prior Ad  | dress:  | Dates Debtor 2<br>lived there                         |
|                |                     |  |  |  | ity property state or territory<br>co, Texas, Washington and W    |   |
|                | ■ No<br>□ Yes. Ma   | ke sure you fill out <i>Sch</i>            | nedule H: Your Codebtors (O                | fficial Form 106H).  |   |   |
| Part           | Explain             | n the Sources of You                       | r Income                                   |  |   |   |
|                | Fill in the tota    | I amount of income yo                      | u received from all jobs and a             | ng a business during this yeal businesses, including parter together, list it only once ur |   | ndar years?   |
|                | □ No<br>■ Yes. Fill | in the details.                            |  |  |   |   |
|                |                     |  | Debtor 1                                   |  | Debtor 2  |   |
|                |                     |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)                                      | Sources of income<br>Check all that apply.                        | Gross income<br>(before deductions<br>and exclusions) |
|                |                     | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips        | \$16,750.00  | ☐ Wages, commissions, bonuses, tips                               |   |
|                |                     |  | ☐ Operating a business                     |  | ☐ Operating a business  |   |

Official Form 107

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 28 of 42 Case number (if known) Debtor 1 Carlos Rojas Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$36,302.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$35,234.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony, child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery

winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Nο

Yes. Fill in the details.

| Debtor 1                             |  | Debtor 2                             |   |  |
|--------------------------------------|--|--------------------------------------|---|--|
| Sources of income<br>Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income<br>Describe below. | Gross income<br>(before deductions<br>and exclusions) |  |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| 6. | Are either | Debtor 1's or | Debtor 2's | debts primari | ly consumer ( | debts? |
|----|------------|---------------|------------|---------------|---------------|--------|
|----|------------|---------------|------------|---------------|---------------|--------|

П No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

#### Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

**Creditor's Name and Address** Amount you Was this payment for ... Dates of payment Total amount still owe paid

Debtor 1 Carlos Rojas Document Page 29 of 42
Case number (if known)

| 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; co of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support an alimony. |   |                             | al partner; corporations agent, including one for |                      |                    |                              |
|--|---|-----------------------------|---|----------------------|--------------------|------------------------------|
|  | ☐ Yes. List all payments to an insider.   |                             |   |                      |                    |                              |
|  | Insider's Name and Address  | Dates of payment            | Total amount paid                                 | Amount you still owe | Reason for         | this payment                 |
| 8.   | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos   |                             | ments or transfer a                               | any property on a    | ccount of a d      | ebt that benefited an        |
|  | <ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>   |                             |   |                      |                    |                              |
|  | Insider's Name and Address  | Dates of payment            | Total amount paid                                 | Amount you still owe |                    | this payment<br>ditor's name |
| Par  | t 4: Identify Legal Actions, Repossession   | e and Forcelocures          |   |                      |                    |                              |
| 9.   | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details. | cy, were you a party in an  |   |                      |                    |                              |
|  | Case title Case number  | Nature of the case          | Court or agency                                   |                      | Status of th       | ne case                      |
| 10.  | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11. □ Yes. Fill in the information below.       | v.                          | erty repossessed, f                               |                      | shed, attache      |                              |
|  | Creditor Name and Address   | Describe the Property       |   | Date                 |                    | Value of the<br>property     |
|  |   | Explain what happened       |   |                      |                    |                              |
| 11.  | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.   |                             | luding a bank or fir                              | nancial institutior  | n, set off any a   | amounts from your            |
|  | Creditor Name and Address   | Describe the action the     | creditor took                                     | Date<br>taker        | action was         | Amount                       |
| 12.  | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes  |                             | erty in the possess                               | ion of an assigne    | e for the ben      | efit of creditors, a         |
| Par  | List Certain Gifts and Contributions  |                             |   |                      |                    |                              |
| 13.  | ■ No  | tcy, did you give any gifts | s with a total value                              | of more than \$60    | 0 per person       | ?                            |
|  | Yes. Fill in the details for each gift.   |                             |   |                      |                    |                              |
|  | Gifts with a total value of more than \$600 per person  | Describe the gifts          |   | Dates<br>the g       | s you gave<br>ifts | Value                        |
|  | Person to Whom You Gave the Gift and Address:   |                             |   |                      |                    |                              |

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 30 of 42 Case number (if known)

| 14. | Within 2 years before you filed for bankru  | ıptcy, d                 | lid you give any gifts or contributior                                     | ns with a total | value of more than                      | \$600 to any charity?   |
|-----|---|--------------------------|--|-----------------|---|-------------------------|
|     | No  |                          | ••   |                 |   |                         |
|     | Yes. Fill in the details for each gift or co  |                          | Describe what you contributed  |                 | Dates you                               | Value                   |
|     | more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)   |                          | Describe what you contributed  |                 | contributed                             | value                   |
| Par | t 6: List Certain Losses  |                          |  |                 |   |                         |
| 15. | Within 1 year before you filed for bankrup or gambling?   | otcy or                  | since you filed for bankruptcy, did y                                      | you lose anytl  | hing because of thef                    | t, fire, other disaster |
|     | No  |                          |  |                 |   |                         |
|     | ☐ Yes. Fill in the details.   |                          |  |                 |   |                         |
|     | Describe the property you lost and  | Descri                   | be any insurance coverage for the lo                                       | oss             | Date of your                            | Value of property       |
|     |   |                          | the amount that insurance has paid. Lee claims on line 33 of Schedule A/B: |                 | loss                                    | lost                    |
| Par | t 7: List Certain Payments or Transfers   |                          |  |                 |   |                         |
| 16. | Within 1 year before you filed for bankrup<br>consulted about seeking bankruptcy or p<br>Include any attorneys, bankruptcy petition pu  | reparir                  | g a bankruptcy petition?   |                 |   | rty to anyone you       |
|     | □ No  |                          |  |                 |   |                         |
|     | Yes. Fill in the details.   |                          |  |                 |   |                         |
|     | Person Who Was Paid   |                          | Description and value of any prop  | erty            | Date payment                            | Amount of               |
|     | Address Email or website address Person Who Made the Payment, if Not Yo   | ou                       | transferred  |                 | or transfer was made                    | payment                 |
|     | LAW OFFICE OF FAUSTINO<br>RODRIGUEZ<br>5141 W FULLERTON AVE<br>Chicago, IL 60639  |                          | Bankruptcy Petition  |                 |   | \$800.00                |
|     |   |                          |  |                 |   |                         |
|     | PreBk.com   |                          |  |                 | Bankruptcy<br>Certificate               | \$14.95                 |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that  No   | itors o                  | to make payments to your creditor  |                 | r transfer any prope                    | rty to anyone who       |
|     | Yes. Fill in the details.   |                          |  |                 |   |                         |
|     | Person Who Was Paid<br>Address  |                          | Description and value of any prop transferred                              | erty            | Date payment<br>or transfer was<br>made | Amount of payment       |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of your include both outright transfers and transfers include gifts and transfers that you have alressed in the work of the wore of the work of | r <b>busin</b><br>made a | ess or financial affairs? as security (such as the granting of a s         |                 |   |                         |
|     | Person Who Received Transfer  |                          | Description and value of   |                 | any property or                         | Date transfer was       |
|     | Address   |                          | property transferred   |                 | received or debts                       | made                    |
|     | Person's relationship to you  |                          |  |                 |   |                         |

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Page 31 of 42 Case number (if known) Document

Carlos Rojas Debtor 1

| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  |  | ny property to a   | self-settle             | ed trust or similar device                           | e of which you are a                  | 1          |
|-----|--|--|--------------------|-------------------------|--|---------------------------------------|------------|
|     | ■ No   |  |                    |                         |  |                                       |            |
|     | Yes. Fill in the details.  Name of trust   | Description and  | value of the pro   | perty trans             | sferred  | Date Transfer w                       | as         |
|     |  |  |                    |                         |  | made                                  |            |
| Pai | rt 8: List of Certain Financial Accounts, Ins  | struments, Safe Depos  | it Boxes, and St   | orage Unit              | ts   |                                       |            |
| 20. | Within 1 year before you filed for bankruptc<br>sold, moved, or transferred?<br>Include checking, savings, money market, o<br>houses, pension funds, cooperatives, assoc | or other financial accou   | ınts; certificates | of deposi               | •  | •                                     |            |
|     | ■ No   |  |                    |                         |  |                                       |            |
|     | ☐ Yes. Fill in the details.  |  |                    |                         |  |                                       |            |
|     | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   | Last 4 digits of account number                                      | Type of acco       | unt or                  | Date account was closed, sold, moved, or transferred | Last balan<br>before closing<br>trans | or         |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  | year before you filed fo   | r bankruptcy, a    | ny safe de <sub>l</sub> | posit box or other depo                              | sitory for securities                 | <b>;</b> , |
|     | ■ No<br>□ Yes. Fill in the details.  |  |                    |                         |  |                                       |            |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had ac<br>Address (Number,<br>State and ZIP Code)           |                    | Describe                | the contents   | Do you still have it?                 |            |
| 22. | _  | or place other than you  | r home within 1    | year before             | re you filed for bankrup                             | itcy?                                 |            |
|     | ■ No □ Yes. Fill in the details.   |  |                    |                         |  |                                       |            |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | Who else has or<br>to it?<br>Address (Number,<br>State and ZIP Code) |                    | Describe                | the contents   | Do you still have it?                 |            |
| Pai | rt 9: Identify Property You Hold or Control  | ,  |                    |                         |  |                                       |            |
| 23. | Do you hold or control any property that so for someone.   | meone else owns? Inc   | lude any proper    | ty you bor              | rowed from, are storing                              | រុ for, or hold in trus               | t          |
|     | ■ No □ Yes. Fill in the details.   |  |                    |                         |  |                                       |            |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the pro<br>(Number, Street, City,<br>Code)                  |                    | Describe                | the property   | Val                                   | ue         |
| Pai | rt 10: Give Details About Environmental Info   | ormation   |                    |                         |  |                                       |            |
| For | the purpose of Part 10, the following definition   | ons apply:   |                    |                         |  |                                       |            |
|     | Environmental law means any federal, state toxic substances, wastes, or material into the  |  |                    | • .                     |  |                                       | or         |

- regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Page 32 of 42 Case number (if known) Document

Debtor 1 Carlos Rojas

| 24. | Has any governmental unit notified you that   | you may be liable or potentially liable                                    | under or in violation of an environme                    | ental law?         |
|-----|---|--|--|--------------------|
|     | ■ No □ Yes. Fill in the details.  |  |  |                    |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)                      | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                        | Date of notice     |
| 25. | Have you notified any governmental unit of a  | any release of hazardous material?   |  |                    |
|     | ■ No □ Yes. Fill in the details.  |  |  |                    |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)                      | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                        | Date of notice     |
| 26. | Have you been a party in any judicial or adm  | inistrative proceeding under any envir                                     | ronmental law? Include settlements a                     | and orders.        |
|     | ■ No<br>□ Yes. Fill in the details.   |  |  |                    |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                                       | Status of the case |
| Par | 11: Give Details About Your Business or C   | Connections to Any Business  |  |                    |
| 27. | Within 4 years before you filed for bankrupto   | y, did you own a business or have any                                      | y of the following connections to any                    | business?          |
|     | ☐ A sole proprietor or self-employed in   | a trade, profession, or other activity,                                    | either full-time or part-time                            |                    |
|     | ☐ A member of a limited liability compa   | any (LLC) or limited liability partnershi                                  | p (LLP)  |                    |
|     | ☐ A partner in a partnership  |  |  |                    |
|     | ☐ An officer, director, or managing exe   | cutive of a corporation  |  |                    |
|     | ☐ An owner of at least 5% of the voting   | or equity securities of a corporation                                      |  |                    |
|     | ■ No. None of the above applies. Go to Pa   | art 12.  |  |                    |
|     | Yes. Check all that apply above and fill i  |  |  |                    |
|     | Business Name   | Describe the nature of the business  | Employer Identification number                           |                    |
|     | Address<br>(Number, Street, City, State and ZIP Code)                                   | Name of accountant or bookkeeper   | Do not include Social Security in Dates business existed | number or IIIN.    |
| 28. | Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties. | y, did you give a financial statement to                                   | o anyone about your business? Inclu                      | de all financial   |
|     | ■ No<br>□ Yes. Fill in the details below.   |  |  |                    |
|     | Name<br>Address<br>(Number, Street, City, State and ZIP Code)                           | Date Issued  |  |                    |
|     |   |  |  |                    |

Page 33 of 42 Case number (if known) Debtor 1 Carlos Rojas Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carlos Rojas Signature of Debtor 2 Carlos Rojas Signature of Debtor 1

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

## Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 34 of 42

| Fill in this infor              | mation to identify your                                | case:                 |  |  |
|---------------------------------|--|-----------------------|--|--|
| Debtor 1                        | Carlos Rojas   |                       |  |  |
|                                 | First Name   | Middle Name           | Last Name  | _  |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name           | Last Name  | -  |
| United States Ba                | ankruptcy Court for the:                               | NORTHERN DIST         | TRICT OF ILLINOIS  | _  |
| Case number                     |  |                       |  |  |
| (if known)                      |  |                       |  | ☐ Check if this is an amended filing                       |
|                                 |  |                       |  |  |
| Official Fo                     | orm 108  |                       |  |  |
| Stateme                         | nt of Intentio   | n for Indiv           | riduals Filing Under Cha   | pter 7 12/15   |
|                                 |  |                       |  |  |
|                                 | lividual filing under cha<br>/e claims secured by yo   |                       | l out this form if:  |  |
|                                 | sed personal property a                                |                       | ot avaired   |  |
| You must file th                | is form with the court w<br>ever is earlier, unless th | ithin 30 days after   | or expired. you file your bankruptcy petition or by the da e time for cause. You must also send copies |  |
|                                 | eople are filing togethe                               | r in a joint case, bo | th are equally responsible for supplying corr  | ect information. Both debtors must                         |
|                                 | and accurate as possib<br>our name and case nur        |                       | needed, attach a separate sheet to this form   | n. On the top of any additional pages,                     |
| Part 1: List Y                  | our Creditors Who Hav                                  | e Secured Claims      |  |  |
| 1. For any credit               |  | art 1 of Schedule D   | : Creditors Who Have Claims Secured by Pro   | operty (Official Form 106D), fill in the                   |
|                                 | reditor and the property t                             | hat is collateral     | What do you intend to do with the property secures a debt?   | y that Did you claim the property as exempt on Schedule C? |
| Creditor's                      |  |                       | ☐ Surrender the property.  | □ No   |
| name:                           |  |                       | ☐ Retain the property and redeem it.   |  |
| Description of                  | f  |                       | Retain the property and enter into a   | ☐ Yes  |

property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's □ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes  $\square$  Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ Surrender the property. ☐ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 35 of 42

| Debtor 1                          | Carlos Rojas   | Case number (if known)   |                                 |
|-----------------------------------|--|--|---------------------------------|
| prope                             | ption of<br>ty<br>ng debt:   | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>                                | ☐ Yes                           |
| in the inf                        | ormation below. Do not list real estate I  | y Leases<br>you listed in Schedule G: Executory Contracts and Unexpired<br>eases. Unexpired leases are leases that are still in effect; the<br>y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | lease period has not yet ended. |
| Describe                          | your unexpired personal property leas  | ses  | Will the lease be assumed?      |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No □ Yes                      |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No                            |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No □ Yes                      |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No □ Yes                      |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No □ Yes                      |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No □ Yes                      |
| Lessor's<br>Descripti<br>Property | on of leased   |  | □ No □ Yes                      |
| Part 3:<br>Under pe               | Sign Below  nalty of perjury, I declare that I have incention that is subject to an unexpired lease. | dicated my intention about any property of my estate that sec  | cures a debt and any personal   |
| X /s/                             | Carlos Rojas<br>Flos Rojas<br>nature of Debtor 1   | Signature of Debtor 2  |                                 |
| Dat                               | 2  | Date   |                                 |

Official Form 108

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-21794 Doc 1 Filed 08/02/18 Entered 08/02/18 15:06:23 Desc Main Document Page 40 of 42

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

| In r | e Carlos Rojas  |  | Case No.                             |   |  |  |
|------|---|--|--------------------------------------|---|--|--|
|      | -   | Debtor(s)                                | Chapter                              | 7   |  |  |
|      | DISCLOSURE OF COM   | IPENSATION OF ATTOR                      | NEY FOR DI                           | EBTOR(S)  |  |  |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |  |                                      |   |  |  |
|      | For legal services, I have agreed to accept   |  | \$                                   | 800.00  |  |  |
|      | Prior to the filing of this statement I have rece   | vived                                    | \$                                   | 800.00  |  |  |
|      |   |  | _                                    | 0.00  |  |  |
| 2.   | The source of the compensation paid to me was:  |  |                                      |   |  |  |
|      | ■ Debtor □ Other (specify):   |  |                                      |   |  |  |
| 3.   | The source of compensation to be paid to me is:   |  |                                      |   |  |  |
|      | ■ Debtor □ Other (specify):   |  |                                      |   |  |  |
| 4.   | ■ I have not agreed to share the above-disclosed  □ I have agreed to share the above-disclosed com  |  | •                                    | •   |  |  |
|      | copy of the agreement, together with a list of the  |  |                                      |   |  |  |
| 5.   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:   |  |                                      |   |  |  |
|      | <ul><li>a. Analysis of the debtor's financial situation, and</li><li>b. Preparation and filing of any petition, schedules</li><li>c. Representation of the debtor at the meeting of c</li><li>d. [Other provisions as needed]</li></ul>   | s, statement of affairs and plan which n | nay be required;                     |   |  |  |
|      | Negotiations with secured creditors reaffirmation agreements and appli 522(f)(2)(A) for avoidance of liens o  | cations as needed; preparation a         | mption planning<br>and filing of mot | ; preparation and filing of ions pursuant to 11 USC |  |  |
| 6.   | By agreement with the debtor(s), the above-disclos<br>Representation of the debtors in an<br>any other adversary proceeding.  |  |                                      | es, relief from stay actions or                     |  |  |
|      |   | CERTIFICATION                            |                                      |   |  |  |
| this | I certify that the foregoing is a complete statement bankruptcy proceeding.   | of any agreement or arrangement for p    | payment to me for r                  | epresentation of the debtor(s) in                   |  |  |
|      |   | /s/ FAUSTINO ROD                         | RIGUEZ                               |   |  |  |
| 1    | Date  | FAUSTINO RODRIC<br>Signature of Attorney |                                      |   |  |  |
|      |   | Law Office of Faus                       | stino Rodriguez                      |   |  |  |
|      |   | 5141 W Fullerton A<br>Chicago, IL 60639  | lve                                  |   |  |  |
|      |   | 773-237-3465 Fax                         |                                      |   |  |  |
|      |   | frodriguezlaw@gm<br>Name of law firm     | nail.com                             |   |  |  |
|      |   | rianie oj iaw jirm                       |                                      |   |  |  |

### United States Bankruptcy Court Northern District of Illinois

| In re | Carlos Rojas  |                                  | Case No. |   |  |  |
|-------|---|----------------------------------|----------|---|--|--|
|       | •   | Debtor(s)                        | Chapter  | 7 |  |  |
|       | VEF   | RIFICATION OF CREDITOR M         | ATRIX    |   |  |  |
|       |   | Number of Creditors: 2           |          |   |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |                                  |          |   |  |  |
| Date: |   | /s/ Carlos Rojas<br>Carlos Rojas |          |   |  |  |
|       |   | Signature of Debtor              |          |   |  |  |

Capital One, N.A. 1680 Capital One Dr Mc Lean, VA 22102

Saks Fifth Ave Bankruptcy Department 3455 Hwy 80 W Jackson, MS 39209